



Department of Defense  
**DIRECTIVE**

**AD-A272 629**



October 21, 1985  
NUMBER 6025.7

ASD(HA)

SUBJECT: Off-Duty Employment By DoD Health Care Providers

- References:
- (a) DoD Directive 5500.7, "Standards of Conduct," January 15, 1977
  - (b) DoD Directive 6025.4, "Credentialing of Health Care Providers," February 11, 1985
  - (c) DoD 6010.8-R, "Civilian Health and Medical Program of the Uniformed Services (CHAMPUS)," January 10, 1977, authorized by DoD Instruction 6010.8, October 24, 1984
  - (d) Title 5, United States Code, Section 5536

**A. PURPOSE**

This Directive establishes policy, prescribes procedures, and assigns responsibilities regarding off-duty employment by DoD health care providers.

**B. APPLICABILITY AND SCOPE**

This Directive:

- 1. Applies to the Office of the Secretary of Defense (OSD) and the Military Departments.
- 2. Covers DoD health care providers.

**C. DEFINITIONS**

- 1. DoD Health Care Providers. All DoD active duty military officer, warrant officer, and civilian officer equivalent health care personnel.
- 2. DoD Military Health Care Providers. All DoD active duty military officer and warrant officer health care personnel.
- 3. Off-Duty Employment. Services by a DoD health care provider during his or her off-duty time for which compensation is received.

**D. POLICY**

It is DoD policy that:

- 1. DoD military health care providers be available to provide patient care services to military beneficiaries at all times. Off-duty commitments, both compensated and uncompensated, may not be allowed to interfere with the DoD military health care provider's military duties. The hospital or dental commander shall deny or terminate off-duty employment of health care providers when this interferes with longer working hours at the Military Treatment Facility (MTF) or Dental Treatment Facility (DTF) that he or she determines necessary to reduce patient backlog.

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2. Professional services by DoD health care providers involving teaching and/or writing are encouraged in accordance with DoD Directive 5500.7 (reference (a)). Compensation for these services may not be accepted unless the duties are performed outside the prescribed duty hours or while the DoD health care provider is on official leave.

3. All DoD personnel, excluding special Government employees, are prohibited from using their titles or positions in connection with any commercial enterprise or in endorsing any commercial product. This does not preclude author identification for materials published in accordance with DoD procedures (reference (a)).

4. Health care services by DoD health care providers to other than DoD beneficiaries are allowed only when there is documented community or emergency need for the provider's services.

#### E. RESPONSIBILITIES

1. The Assistant Secretary of Defense (Health Affairs) (ASD(HA)) shall monitor the implementation of this Directive.

2. The Secretaries of the Military Departments, or their designees, shall ensure that this Directive is complied with.

3. The Surgeon General of each Military Department shall ensure compliance with this Directive within the MTFs and DTFs of his or her respective Military Department.

#### F. PROCEDURES

1. DoD health care providers desiring to engage in off-duty employment shall first obtain the written permission of their commanding officer. Documentation relating to the provider's request for permission to engage in off-duty employment shall be maintained in a designated file within the MTF or DTF. Each request for approval of off-duty employment shall include certification by the provider of his or her understanding of all applicable DoD off-duty employment regulations and restrictions. Permission to engage in off-duty employment may be withdrawn at any time by the commanding officers.

2. Off-duty employment for DoD health care providers usually should not exceed 16 hours per week. Periods that exceed 16 hours per week shall be authorized only with the special approval of the commanding officer (e.g., periods providing 24-hour coverage 1 weekend with no hours of off-duty employment the following week). This subsection does not apply to DoD health care personnel on official leave.

3. There shall be a period of at least 6 hours rest between the end of a DoD health care provider's off-duty employment and the start of his or her duties.

4. Off-duty employment may not be approved if the work site is not close enough to allow the DoD military health care provider to return promptly to the MTF or DTF if military duties require his or her presence. A 2 hour travel

time by land is considered maximum allowable time for return to the MTF or DTF. Transportation by air is not allowable, regardless of travel time. This subsection does not apply to DoD health care personnel on official leave.

5. DoD health care providers engaged in graduate training programs (section D, of DoD Directive 6025.4 (reference (b))) shall be prohibited from engaging in off-duty employment.

6. DoD health care providers engaged in off-duty employment may not assume primary responsibility for the medical or dental care of any patient on a continuing basis at the site of off-duty employment.

7. Health care services by a DoD health care provider may not be conducted on military premises; involve expense to the Federal Government; nor involve use of military equipment, personnel, or supplies.

8. DoD health care providers engaged in off-duty employment may not solicit or accept compensation, directly or indirectly, for care rendered to any DoD beneficiary entitled to medical or dental care. Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) payments shall be disallowed in any claim from a CHAMPUS provider in those instances when a DoD health care provider provides direct health care services to a DoD beneficiary. (See Chapter VI of DoD 6010.8-R, reference (c), DoD Directive 5500.7, reference (a) and 5 U.S.C. 5536, reference (d), for qualifying guidelines that apply to DoD health care providers.)

9. A DoD health care provider may not refer patients from MTFs or DTFs to facilities with which the provider maintains off-duty employment. If referral to an off-duty employer is unavoidable, the reasons shall be documented in a memorandum to the commanding officer.

10. The MTF or DTF commander's approval of a DoD health care provider's request for off-duty employment may not be granted without written certification from the off-duty employer that he or she accepts the compensation and availability limitations placed on DoD health care providers. Employers of off-duty DoD health care providers also must agree that as a condition for off-duty employment they shall not seek reimbursement from CHAMPUS for services provided to DoD beneficiaries by DoD health care providers nor shall they seek direct payment for these services from the patient.

11. Compliance with local licensing requirements, the Federal Drug Enforcement Administration requirements, and personal medical liability coverage are the responsibility of the individual DoD health care provider requesting permission for off-duty employment.

12. DoD health care providers shall apply for annual leave for any obligations (e.g., court appearances or testimony before a compensation board) arising out of off-duty employment when these obligations require absence during duty hours.

13. Each MTF or DTF commander shall request a yearly statement from all DoD health care providers under his or her command stating the provider's current off-duty employment status. Negative replies are required. It is the responsibility of each health care provider to update that statement within 1 week of any changes in his or her off-duty employment status.

14. Contracts for DoD health care providers shall specify the restrictions on off-duty employment as contained in this Directive.

15. DoD military health care providers off-duty employment should not interfere with, or unfairly compete with, local civilian practitioners in the health professions. Consultation with the appropriate local professional society should be used to assess the impact of the services rendered by the off-duty military health care provider on the civilian community.

16. DoD military health care providers shall advise their off-duty employers that as military members they are required to respond immediately to calls for military duty that may arise during scheduled off-duty employment.

G. EFFECTIVE DATE AND IMPLEMENTATION

This Directive is effective immediately. Forward one copy of implementing documents to the Assistant Secretary of Defense (Health Affairs) ASD(HA) within 120 days.



William H. Taft, IV  
Deputy Secretary of Defense

# DEPARTMENT OF DEFENSE DIRECTIVES SYSTEM TRANSMITTAL

NUMBER	DATE	DISTRIBUTION
6025.7, Ch 1	February 20, 1990	6000 series

## ATTACHMENTS

Pages 3 and 4

## INSTRUCTIONS FOR RECIPIENTS

The following page changes to DoD Directive 6025.7, "Off-Duty Employment By DoD Health Care Providers," October 21, 1985, are authorized:

### PAGE CHANGES

Remove: Pages 3&4

Insert: Attached replacement pages

Changes appear on page 4 and are indicated by marginal asterisks.

### EFFECTIVE DATE

The above changes are effective immediately.

Approved	
Reviewed	
Checked	
By	form 50
Date	
Approved	
Date	
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*James L. Elmer*  
JAMES L. ELMER  
Director

Correspondence and Directives

DTIC QUALITY INSPECTED 8

Attachments: 2 pages

WHEN PRESCRIBED ACTION HAS BEEN TAKEN, THIS TRANSMITTAL SHOULD BE FILED WITH THE BASIC DOCUMENT

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\* 17. Each MTF or DTF commander shall ensure that internal review staffs \*  
\* review providers' compliance with Service implementing documents with regard \*  
\* to off-duty employment on at least an annual basis. \*

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Donald J. Atwood  
Deputy Secretary of Defense